

2023 OCT -6 AM 10:43

UNITED STATES DISTRICT COURT
FOR THE
DISTRICT OF VERMONT

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Robert W. Johnson,

Plaintiff(s)

vs.

Civil Action No: 2:23-cv-471

Donald J. Trump, et al.,

Defendant(s)

APPLICATION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Plaintiff moves this Court for an order permitting him to file this action *in forma pauperis* without prepayment of fees and costs or security therefore because as the attached affidavit indicates, s/he is unable to pay such costs or give security therefore.

Dated at Buffalo, NY, Vermont, this 28TH day
of September 2023

Robert W. Johnson
Plaintiff

UNITED STATES DISTRICT COURT
for the

Robert W. Johnson
Plaintiff/Petitioner
v.
Donald J. Trump, et al.
Defendant/Respondent

Civil Action No.

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS
(Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

1. If incarcerated. I am being held at:

N/A

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. If not incarcerated. If I am employed, my employer's name and address are:

My gross pay or wages are: \$ 0, and my take-home pay or wages are: \$ 0 per
(specify pay period) None

3. Other Income. In the past 12 months, I have received income from the following sources (check all that apply):

- | | | |
|--|------------------------------|--|
| (a) Business, profession, or other self-employment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (b) Rent payments, interest, or dividends | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (c) Pension, annuity, or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (d) Disability, or worker's compensation payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (e) Gifts, or inheritances | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (f) Any other sources | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

N/A